

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 / 733

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Tammy Duckworth

A. Full Name (Last, First, Middle Initial) Eric Smidt Mailing Address 3491 Mission Oaks Blvd City Camarillo State CA Zip Code 93012 FEC ID number of contributing federal political committee. C Name of Employer Google Occupation CEO Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 5 / 2 0 0 6 Transaction ID: C442764 Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Allan C Smith Mailing Address 13209 Banbury Place City Silver Spring State MD Zip Code 20904 FEC ID number of contributing federal political committee. C Name of Employer Self Employed Occupation Physician Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 1 / 2 0 0 6 Transaction ID: C278860 Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Charles C Smith, Jr. Mailing Address 4021 Vacation Lane City Arlington State VA Zip Code 22207 FEC ID number of contributing federal political committee. C Name of Employer The PMA Group Occupation Consultant Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1750.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 4 / 2 0 0 6 Transaction ID: C437607 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)**2700.00****TOTAL** This Period (last page this line number only)